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POTENTIAL HAZARDOUS WASTE SITE  
FINAL STRATEGY DETERMINATION

REGION SITE NUMBER

07 MD0980 96 7541

File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335), 401 M St., SW, Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME <i>Kewanee Machinery</i>	B. STREET <i>2806 Industrial Rd</i>
C. CITY <i>Kirksville</i>	D. STATE <i>MD</i>
	E. ZIP CODE <i>63501</i>

II. FINAL DETERMINATION

Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.

RECOMMENDATION	MARK 'X'	ACTION AGENCY			
		EPA	STATE	LOCAL	PRIVATE
A. NO ACTION NEEDED	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
B. REMEDIAL ACTION NEEDED, BUT NO RESOURCES AVAILABLE (If yes, complete Section III.)					
C. REMEDIAL ACTION (If yes, complete Section IV.)					
D. ENFORCEMENT ACTION (If yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.)					

E. RATIONALE FOR FINAL STRATEGY DETERMINATION

*MDNR confirmed 7-9-86 that all work (removal of drums, unearthing and draining of USTs) needed to clean up site had been performed. The facility is regulated under RCRA as a generator.*

F. IF A CASE DEVELOPMENT PLAN HAS BEEN PREPARED, SPECIFY THE DATE PREPARED (mo., day, & yr.)

G. IF AN ENFORCEMENT CASE HAS BEEN FILED, SPECIFY THE DATE FILED (mo., day, & yr.)

H. PREPARER INFORMATION

1. NAME *Lic Fleming KH 1-2-9*

2. TELEPHONE NUMBER

*910 236-2856*

3. DATE (mo., day, & yr.)

*6-3-87*

III. REMEDIAL ACTIONS TO BE TAKEN WHEN RESOURCES BECOME AVAILABLE

List all remedial actions, such as excavation, removal, etc. to be taken as soon as resources become available. See instructions for a list of Key Words for each of the actions to be used in the spaces below. Provide an estimate of the approximate cost of the remedy.

A. REMEDIAL ACTION	B. ESTIMATED COST	C. REMARKS
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
D. TOTAL ESTIMATED COST	\$	

**SUPERFUND**

JUL 20 1987  
SITE LOG

JUL 20 1987  
CERCLIS



POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT  
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

MO D 980967541

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site)

Kewanee Machinery

02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER

2806 Industrial Drive

03 CITY

Kirksville

04 STATE

05 ZIP CODE

06 COUNTY

07 COUNTY CODE

08 CONG DIST

MO

63501

Adair

001

6

09 COORDINATES LATITUDE

LONGITUDE

40 13 21.0

92 35 27.0

**SUPERFUND**

10 DIRECTIONS TO SITE (Starting from nearest public road)

Industrial Park, North end of town

FEB 11 1985

**SITE LOG**

III. RESPONSIBLE PARTIES

01 OWNER (If known)

Chromalloy American Corp.

02 STREET (Business, mailing, residential)

120 South Central

03 CITY

St. Louis

04 STATE

05 ZIP CODE

06 TELEPHONE NUMBER

MO

63105

(314) 726-9252

07 OPERATOR (If known and different from owner)

08 STREET (Business, mailing, residential)

09 CITY

10 STATE

11 ZIP CODE

12 TELEPHONE NUMBER

13 TYPE OF OWNERSHIP (Check one)

☒ A. PRIVATE ☐ B. FEDERAL:

(Agency name)

☐ C. STATE

☐ D. COUNTY

☐ E. MUNICIPAL

☐ F. OTHER:

(Specify)

☐ G. UNKNOWN

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)

☐ A. RCRA 3001 DATE RECEIVED: / /

MONTH DAY YEAR

☐ B. UNCONTROLLED WASTE SITE (CERCLA 103 c)

DATE RECEIVED: / /

MONTH DAY YEAR

☒ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION

☒ YES

DATE

12/11/84

☐ NO

MONTH DAY YEAR

BY (Check all that apply)

☐ A. EPA

☐ B. EPA CONTRACTOR

☒ C. STATE

☐ D. OTHER CONTRACTOR

☐ E. LOCAL HEALTH OFFICIAL

☐ F. OTHER:

(Specify)

CONTRACTOR NAME(S):

02 SITE STATUS (Check one)

☐ A. ACTIVE

☒ B. INACTIVE

☐ C. UNKNOWN

03 YEARS OF OPERATION

Mid 1984

☐ UNKNOWN

BEGINNING YEAR

ENDING YEAR

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED

45 drums of paint waste and solvent

**SUPERFUND**

FEB 11 1985

**SITE LOG**

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION

Plant has closed down. All contents have been removed except paint waste. One drum of paint waste has been dumped on ground.

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)

☐ A. HIGH

(Inspection required promptly)

☐ B. MEDIUM

(Inspection required)

☒ C. LOW

(Inspect on time available basis)

☐ D. NONE

(No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT

Tim Evans

02 OF (Agency/Organization)

Chromalloy

03 TELEPHONE NUMBER

(314) 726-9252

04 PERSON RESPONSIBLE FOR ASSESSMENT

Bob Eck

05 AGENCY

MO DNR

06 ORGANIZATION

Macon Regional

07 TELEPHONE NUMBER

(816) 385-2129

08 DATE

12, 27, 84

MONTH DAY YEAR



POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE MO 02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

Drums (except for one) are located on concrete pad. No groundwater problem anticipated.

01 ☐ B. SURFACE WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

No surface water problems apparent.

01 ☐ C. CONTAMINATION OF AIR

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

No air pollution exists

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

No problems at present.

01 ☐ E. DIRECT CONTACT

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

Only if someone is dumb enough to eat paint chips.

01 ☒ F. CONTAMINATION OF SOIL

03 AREA POTENTIALLY AFFECTED: ~ 10 sq. ft.  
(Acres)

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ G. DRINKING WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

No Problem

01 ☐ H. WORKER EXPOSURE/INJURY

03 WORKERS POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

No workers on site

01 ☐ I. POPULATION EXPOSURE/INJURY

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

No Problem - all drums but one are closed.



POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER  
MO

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

No Problem

01 ☐ K. DAMAGE TO FAUNA  
04 NARRATIVE DESCRIPTION (Include name(s) of species)

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

No Problem

01 ☐ L. CONTAMINATION OF FOOD CHAIN  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

No Problem

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES  
(Spills/runoff/standing liquids/leaking drums)

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_  
N/A

04 NARRATIVE DESCRIPTION

01 ☐ N. DAMAGE TO OFFSITE PROPERTY  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

None Expected

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

No Problem

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

N/A

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

Access to the site is uncontrolled

III. TOTAL POPULATION POTENTIALLY AFFECTED: None

IV. COMMENTS

Chromalloy has been contacted. They presently plan to remove and properly dispose of subject waste.

V. SOURCES OF INFORMATION (Cite specific references, e. g., state files, sample analysis, reports)

On site survey and Stephanie Polans, Economic Development Director  
Kirksville, MO 63501 816-627-1224

ERRIS 85 JAN REC'D



# POTENTIAL HAZARDOUS WASTE SITE SITE IDENTIFICATION

## I. IDENTIFICATION

01 STATE MO	02 SITE NUMBER 980967541
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## II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) Kewanee Machinery		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER 2806 Industrial Road			
03 CITY Kirksville	04 STATE MO	05 ZIP CODE 63501	06 COUNTY Adair	07 COUNTY CODE 001	08 CONG DIST 6

09 DIRECTIONS TO SITE (Starting from nearest public road)

Industrial Park, North end of town

## III. RESPONSIBLE PARTIES

01 OWNER (If known) Chromalloy American Corp.		02 STREET (Business, residential, mailing) 120 South Central			
03 CITY St. Louis	04 STATE MO	05 ZIP CODE 63105	06 TELEPHONE NUMBER (314) 726-9252		
07 OPERATOR (If known and different from owner)		08 STREET (Business, residential, mailing)			
09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER ( )		

13 TYPE OF OWNERSHIP (Check one)  
☒ A. PRIVATE    ☐ B. FEDERAL: \_\_\_\_\_ (Agency name)  
☐ C. STATE    ☐ D. COUNTY    ☐ E. MUNICIPAL  
☐ F. OTHER: \_\_\_\_\_ (Specify)  
☐ G. UNKNOWN

## IV. HOW IDENTIFIED

01 DATE IDENTIFIED 12, 11, 84 MONTH DAY YEAR	02 IDENTIFIED BY (Check all that apply) <input type="checkbox"/> A. CITIZEN COMPLAINT <input type="checkbox"/> B. INDUSTRY <input checked="" type="checkbox"/> C. STATE/LOCAL GOVERNMENT <input type="checkbox"/> D. AERIAL RECONNAISSANCE <input type="checkbox"/> E. RCRA INSPECTION <input type="checkbox"/> F. SURFACE IMPOUNDMENT ASSESSMENT <input type="checkbox"/> G. OTHER EPA IDENTIFICATION <input type="checkbox"/> H. OTHER _____ (Specify)				
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## V. SITE CHARACTERIZATION

01 TYPE OF SITE (Check all that apply)  
☒ A. STORAGE    ☐ B. TREATMENT    ☐ C. DISPOSAL    ☐ D. UNAUTHORIZED DUMPING    ☐ E. OTHER \_\_\_\_\_ (Specify)

02 SUMMARY OF KNOWN PROBLEMS (Provide narrative description)

45 drums of paint waste and solvent

DEC 26 1984

03 SUMMARY OF ALLEGED OR POTENTIAL PROBLEMS (Provide narrative description)

Plant has closed down - all contents have been removed except paint waste. One drum of paint chips has been dumped on ground.

## VI. INFORMATION AVAILABLE FROM

01 CONTACT Tim Evans		02 OF (Agency Organization) Chromalloy		03 TELEPHONE NUMBER 314 726-9252	
04 PREPARED BY Bob Eck		05 AGENCY MO DNR	06 ORGANIZATION Macon Regional	07 TELEPHONE NUMBER 816385-2129	08 DATE 12/19/84 MONTH DAY YEAR

EPA FORM 2070-11 (7-81)

Office

JAN 22 1985

SITE LOG